



CORPORATE PAYMENT SYSTEMS  
P.O. BOX 6343  
FARGO, ND 58125-6343

ACCOUNT NUMBER

AMOUNT DUE

\$0.00



000009470 1 MB 0.390 106481080984141 P  
JOHN STACEY  
CITY OF BELLEVUE  
210 W MISSION AVE  
BELLEVUE NE 68005-5237

"MEMO STATEMENT ONLY"  
DO NOT REMIT PAYMENT

MESSAGES:

TRAN DATE	POST DATE	REF #	TRANSACTION DESCRIPTION	AMOUNT	-NOTATION-
04-16	04-18	17123	IACP 800-843-4227 VA	195.00	
04-15	04-18	00005	HOLIDAY INN BATON ROUGE-S BATON ROUGE LA	335.49	
			21798055 ARRIVAL: 04-12-11		
04-12	04-22	03402	HOTELS.COM US 800-219-4606 WA	177.77CR	
04-22	04-25	36177	WINGATE INN ALLENTOWN PA	1,504.80	
			00265653 ARRIVAL: 04-03-11		
04-29	05-02	00008	HOLIDAY INN KEARNEY NE	178.12	
04-29	05-02	00008	HOLIDAY INN KEARNEY NE	178.12	
04-29	05-02	00008	HOLIDAY INN KEARNEY NE	178.12	
05-04	05-06	24670	KAHLER GRAND ROCHESTER MN	89.10	
			0504000059988 ARRIVAL: 05-04-11		
05-06	05-09	15181	IACP 800-843-4227 VA	195.00	
05-07	05-09	12400	IACP 800-843-4227 VA	195.00	
05-06	05-09	77773	KAHLER GRAND ROCHESTER MN	178.20	
			0506000059907 ARRIVAL: 05-06-11		
05-11	05-11	62506	JOHN E. REID AND ASSOC 312-732-4289 IL	580.00	
05-12	05-12	00157	GLOCK PROFESSIONAL INC 770-319-4794 GA	150.00	

ACCOUNTING CODE		SIGNATURE/APPROVAL	
CUSTOMER SERVICE CALL  800-344-5696	CARD ACCOUNT NUMBER	ACCOUNT SUMMARY	
	STATEMENT DATE:  05/15/11	PURCHASES, FEES & ADJUSTMENTS	3,956.95
		CHECKS/CASH ADVANCES	.00
		BILLING OFFICE ACCOUNT NUMBER  BILLING OFFICE CONTACT AND ADDRESS CITY OF BELLEVUE-ONE CARD MARIE WOOD 210 W MISSION AVE BELLEVUE NE 68005-5237	
		STATEMENT TOTAL	3,779.18

#5



**Holiday Inn**

104

06-01-11

John Stacey  
207 Washington St.  
Bellevue NE 68005  
JS

Folio No. : 113900  
A/R Number :  
Group Code : FBI  
Company :  
Membership No. :  
Invoice No. :

Room No. : 253  
Arrival : 04-27-11  
Departure : 04-29-11  
Conf. No. : 69110030  
Rate Code :  
Page No. : 1 of 1

Date	Description	Charges	Credits
-27-11	*Accommodation	77.95	
-27-11	State Tax	4.29	
-27-11	Lodging Tax	3.90	
-27-11	City Tax	1.17	
-27-11	Occupancy Tax	1.75	
-28-11	*Accommodation	77.95	
-28-11	State Tax	4.29	
-28-11	Lodging Tax	3.90	
-28-11	City Tax	1.17	
-28-11	Occupancy Tax	1.75	
-29-11	Visa XXXXXXXXXXXXXXX1381		178.12
Total		178.12	178.12
Balance		0.00	

**Test Signature:**

I have received the goods and / or services in the amount shown hereon. I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company, or associate fails to pay for any part or the full amount of these charges. If credit card charge, I further agree to perform the obligations set forth in the cardholder's agreement with the issuer.





CORPORATE PAYMENT SYSTEMS  
P.O. BOX 6343  
FARGO, ND 58125-6343

ACCOUNT NUMBER \_\_\_\_\_

AMOUNT DUE \_\_\_\_\_ \$0.00



000005268 1 AB 0.368 106481166716491 P  
JOHN STACEY  
CITY OF BELLEVUE  
210 W MISSION AVE  
BELLEVUE NE 68005-5237

"MEMO STATEMENT ONLY"  
DO NOT REMIT PAYMENT

MESSAGES:

TRAN DATE	POST DATE	REF #	TRANSACTION DESCRIPTION	AMOUNT	-NOTATION-
06-21	06-22	04583	PUBLIC AGENCY TRAINING 317-8215085 IN	475.00	
06-21	06-22	44597	PUBLIC AGENCY TRAINING 317-8215085 IN	950.00	
06-28	06-29	12031	ROSEN SHNGLE CR ONLINE ORLANDO FL	725.60	
06-28	06-29	12072	ROSEN SHNGLE CR ONLINE ORLANDO FL	725.60	
07-02	07-04	18539	HYATT HOTELS WICHITA WICHITA KS 1381 ARRIVAL: 06-26-11	504.20	
07-02	07-04	87023	JOHN E. REID AND ASSOC 312-732-4289 IL	610.00	
07-06	07-07	69581	JOHN E. REID AND ASSOC 312-732-4289 IL	420.00	

ACCOUNTING CODE		SIGNATURE/APPROVAL	
CUSTOMER SERVICE CALL  800-344-5696	CARD ACCOUNT NUMBER	ACCOUNT SUMMARY	
	STATEMENT DATE:  07/15/11	PURCHASES, FEES & ADJUSTMENTS	4,410.40
		CHECKS/CASH ADVANCES	.00
		BILLING OFFICE CONTACT AND ADDRESS CITY OF BELLEVUE-ONE CARD MARIE WOOD 210 W MISSION AVE BELLEVUE NE 68005-5237	
		CREDITS	.00
		STATEMENT TOTAL	4,410.40



CORPORATE PAYMENT SYSTEMS  
P.O. BOX 6343  
FARGO, ND 58125-6343

ACCOUNT NUMBER \_\_\_\_\_

AMOUNT DUE \_\_\_\_\_ \$0.00



|||||11010 1 AB 0.368 106481209629788 P  
JOHN STACEY  
CITY OF BELLEVUE  
210 W MISSION AVE  
BELLEVUE NE 68005-5237

"MEMO STATEMENT ONLY"  
DO NOT REMIT PAYMENT

MESSAGES:

TRAN DATE	POST DATE	REF #	TRANSACTION DESCRIPTION	AMOUNT	-NOTATION-
07-21	07-22	80117	DRI'CCNOW.COM*CDMAWARE 800-884-7476 MN	108.00	
07-25	07-26	57633	PUBLIC AGENCY TRAINING 317-8215085 IN	250.00	
07-26	07-26	84198	DESERT SNOW LLC 405-293-9800 OK	990.00	
07-22	07-27	64816	FAIRMONT QUEEN ELIZABETH MONTREAL ON	765.02	
			(FOREIGN CURRENCY) 702.76 CAD 07/27 (RATE)	0.9186	
07-22	07-27	64840	FAIRMONT QUEEN ELIZABETH MONTREAL ON	765.02	
			(FOREIGN CURRENCY) 702.76 CAD 07/27 (RATE)	0.9186	
07-22	07-27	65326	FAIRMONT QUEEN ELIZABETH MONTREAL ON	765.02	
			(FOREIGN CURRENCY) 702.76 CAD 07/27 (RATE)	0.9186	
07-29	07-29	00167	DALLAS CHILDRENS ADVOCAC 2148182608 TX	375.00CR	
07-29	07-29	00175	DALLAS CHILDRENS ADVOCAC 2148182608 TX	375.00CR	

ACCOUNTING CODE		SIGNATURE/APPROVAL		
CUSTOMER SERVICE CALL  800-344-5696	CARD ACCOUNT NUMBER	ACCOUNT SUMMARY		
	STATEMENT DATE:  08/15/11	PURCHASES, FEES & ADJUSTMENTS	3,643.06	
		CHECKS/CASH ADVANCES	.00	
		BILLING OFFICE ACCOUNT NUMBER		CREDITS
BILLING OFFICE CONTACT AND ADDRESS CITY OF BELLEVUE-ONE CARD MARIE WOOD 210 W MISSION AVE BELLEVUE NE 68005-5237		STATEMENT TOTAL		2,893.06



CORPORATE PAYMENT SYSTEMS  
P.O. BOX 6343  
FARGO, ND 58125-6343

ACCOUNT NUMBER \_\_\_\_\_

AMOUNT DUE \_\_\_\_\_ \$0.00



|||||  
000009125 1 MB 0.390 106481251761130 P  
JOHN STACEY  
CITY OF BELLEVUE  
210 W MISSION AVE  
BELLEVUE NE 68005-5237

"MEMO STATEMENT ONLY"  
DO NOT REMIT PAYMENT

MESSAGES:

TRAN OATE	POST OATE	REF #	TRANSACTION DESCRIPTION	AMOUNT	-NOTATION-
08-24	08-25	79275	RENAISSANCE D/T OEPOT MINNEAPOLIS MN 1670000200007 ARRIVAL: 08-22-11	271.03	
08-26	08-26	96207	PAYPAL *CHEROKEE 402-935-7733 CA	295.00	
08-26	08-29	11458	GRIMES AMERICINN GRIMES IA 467160 ARRIVAL: 08-22-11	291.20	
09-09	09-12	01987	LODGE OF THE FOUR SEASONS LAKE OZARK MO 5000113121 ARRIVAL: 09-06-11	321.36	
09-09	09-12	09204	ALS AFFILIATES INC. 402-292-8535 NE	12.00	

ACCOUNTING CODE		SIGNATURE/APPROVAL		
CUSTOMER SERVICE CALL  800-344-5696	CARD ACCOUNT NUMBER	ACCOUNT SUMMARY		
	STATEMENT DATE: 09/15/11	PURCHASES, FEES & ADJUSTMENTS	1,190.59	
		CHECKS/CASH ADVANCES	.00	
		BILLING OFFICE ACCOUNT NUMBER		CREDITS
BILLING OFFICE CONTACT AND ADDRESS CITY OF BELLEVUE-ONE CARD MARIE WOOD 210 W MISSION AVE BELLEVUE NE 68005-5237		STATEMENT TOTAL		1,190.59

CORPORATE PAYMENT SYSTEMS  
P.O. BOX 6343  
FARGO , ND 58125-6343

ACCOUNT NUMBER \_\_\_\_\_

**AMOUNT DUE** **\$0.00**



0000009000 1 AB 0.368 106481292564364 P  
JOHN STACEY  
CITY OF BELLEVUE  
210 W MISSION AVE  
8ELLEVUE NE 68005-5237

"MEMO STATEMENT ONLY"  
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MESSAGES:

TRAN DATE	POST DATE	REF #	TRANSACTION DESCRIPTION	AMOUNT	-NOTATION-
09-28	09-30	58334	GREAT WOLF LODGE KANSAS CITY KS 0004106516	184.74	ARRIVAL: 09-28-11
10-02	10-04	29573	QUALITY INN 308-2370838 NE 0059420993	278.64	ARRIVAL: 10-01-11
10-03	10-05	72078	PUBLIC AGENCY TRAINING 317-8215085 IN	885.00	

ACCOUNTING CODE		SIGNATURE/APPROVAL	
CUSTOMER SERVICE CALL  800-344-5696	CARD ACCOUNT NUMBER	ACCOUNT SUMMARY	
	STATEMENT DATE:  10/15/11	PURCHASES, FEES & ADJUSTMENTS	1,348.38
		CHECKS/CASH ADVANCES	.00
		CREDITS	.00
BILLING OFFICE ACCOUNT NUMBER  BILLING OFFICE CONTACT AND ADDRESS CITY OF BELLEVUE-ONE CARD MARIE WOOD 210 W MISSION AVE BELLEVUE NE 68005-5237		STATEMENT TOTAL	1,348.38



CORPORATE PAYMENT SYSTEMS  
P.O. BOX 6343  
FARGO, ND 58125-6343

ACCOUNT NUMBER \_\_\_\_\_

AMOUNT DUE \_\_\_\_\_ \$0.00



000011378 1 MB 0.390 106481337231079 P  
JOHN STACEY  
CITY OF BELLEVUE  
210 W MISSION AVE  
BELLEVUE NE 68005-5237

"MEMO STATEMENT ONLY"  
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MESSAGES:

TRAN DATE	POST DATE	REF #	TRANSACTION DESCRIPTION	AMOUNT	NOTATION
10-21	10-24	19179	SILVERSMITH HOTEL CHICAGO IL 1021000059982 ARRIVAL: 10-20-11	287.35	
10-25	10-27	55889	SILVERSMITH HOTEL CHICAGO IL	918.60	
11-04	11-07	02465	NTL REGISTRY OF EMTS 614-888-4484 OH	65.00	
11-04	11-07	02531	NTL REGISTRY OF EMTS 614-888-4484 OH	65.00	
11-08	11-10	00730	NTL REGISTRY OF EMTS 614-888-4484 OH	65.00	
11-09	11-11	02410	NTL REGISTRY OF EMTS 614-888-4484 OH	65.00	
11-09	11-11	02444	NTL REGISTRY OF EMTS 614-888-4484 OH	65.00	
11-13	11-15	00247	NTL REGISTRY OF EMTS 614-888-4484 OH	65.00	

ACCOUNTING CODE		SIGNATURE/APPROVAL	
CUSTOMER SERVICE CALL  800-344-5696	CARD ACCOUNT NUMBER	ACCOUNT SUMMARY	
		PURCHASES, FEES & ADJUSTMENTS	1,595.95
	STATEMENT DATE: 11/15/11	CHECKS/CASH ADVANCES	.00
BILLING OFFICE CONTACT AND ADDRESS CITY OF BELLEVUE-ONE CARD MARIE WOOD 210 W MISSION AVE BELLEVUE NE 68005-5237		CREDITS	.00
		STATEMENT TOTAL	1,595.95



# Silversmith

Hotel & Suites

#1

John Stacey  
2207 Washington St  
Bellevue NE 68005  
United States

A/R Number  
Group Code  
Folio/Invoice No. \*\*\*\*\* /  
Reference #

Room No. 414  
Arrival 10-20-11  
Departure 10-21-11

Page No. 1 of 1  
Cashier No. 108  
User ID MWINDHAM

Date	Description	Charges	Credits
10-20-11	*Room Charge	249.00	
10-20-11	Room Tax	38.35	
10-21-11	Visa XXXXXXXXXXXXXXXX XX/XX		287.35
Total		287.35	287.35
Balance		0.00	

Guest Signature: \_\_\_\_\_

I have received the goods and / or services in the amount shown herein. I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company, or association fails to pay for any part or the full amount of these charges. If a credit card charge, I further agree to perform the obligations set forth in the cardholder's agreement with the issuer.

10 SOUTH WABASH AVENUE  
CHICAGO, IL 60603  
PHONE: 312-372-7696 \* FAX: 312-372-7320  
WWW.SILVERSMITHHOTEL.COM

John Stacey  
2207 Washington St  
Bellevue, NE 68005  
US

A/R Number  
Group Code CHI101811  
Folio/Invoice No. \*\*\*\*\* /  
Reference #

Room No.	414	Page No.	1 of 1
Arrival	10-21-11	Cashier No.	133
Departure	10-25-11	User ID	PHOLDEN

Date	Description	Charges	Credits
10-21-11	*Room Charge	199.00	
10-21-11	Room Tax	30.65	
10-22-11	*Room Charge	199.00	
10-22-11	Room Tax	30.65	
10-23-11	*Room Charge	199.00	
10-23-11	Room Tax	30.65	
10-24-11	*Room Charge	199.00	
10-24-11	Room Tax	30.65	
10-25-11	Visa XXXXXXXXXXXXXXX1381 XX/XX		918.60
Total		918.60	918.60
Balance		0.00	

Guest Signature: \_\_\_\_\_

I have received the goods and / or services in the amount shown herein. I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company, or association fails to pay for any part or the full amount of these charges. If a credit card charge, I further agree to perform the obligations set forth in the cardholder's agreement with the issuer.



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FARGO, ND 58125-6343

ACCOUNT NUMBER \_\_\_\_\_

AMOUNT DUE \_\_\_\_\_ \$0.00



000008626 1 MB 0.390 106481382494363 P  
JOHN STACEY  
CITY OF BELLEVUE  
210 W MISSION AVE  
BELLEVUE NE 68005-5237

"MEMO STATEMENT ONLY"  
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MESSAGES:

TRAN DATE	POST DATE	REF #	TRANSACTION DESCRIPTION	AMOUNT	NOTATION
11-14	11-16	00632	NTL REGISTRY OF EMTS 614-888-4484 OH	65.00	
12-13	12-14	08917	EXPEDIA*141507098251 800-367-3476 NV	541.92	
12-12	12-14	39932	DELTA AIR 0068729638660 ATLANTA GA DEPARTURE: 01-22-12	357.80	
12-14	12-15	00091	OMA DL U ATL DL U AUS DL U MEM DL U OMA GLOCK PROFESSIONAL INC 770-319-4794 GA	390.00	

ACCOUNTING CODE		SIGNATURE/APPROVAL	
CUSTOMER SERVICE CALL  800-344-5696	CARD ACCOUNT NUMBER	ACCOUNT SUMMARY	
	STATEMENT DATE: 12/15/11	CHASES, FEES & ADJUSTMENTS	1,354.72
		CHECKS/CASH ADVANCES	.00
		CREDITS	.00
BILLING OFFICE ACCOUNT NUMBER BILLING OFFICE CONTACT AND ADDRESS CITY OF BELLEVUE-ONE CARD MARIE WOOD 210 W MISSION AVE BELLEVUE NE 68005-5237		STATEMENT TOTAL	1,354.72

No ACTIVITY

1-15-12

elan

CORPORATE PAYMENT SYSTEMS  
P.O. BOX 6343  
FARGO, ND 58125-6343

ACCOUNT NUMBER \_\_\_\_\_

AMOUNT DUE \_\_\_\_\_ \$0.00



000008756 1 MB 0.404 106481473508796 P

JOHN STACEY

CITY OF BELLEVUE

210 W MISSION AVE

BELLEVUE NE 68005-5237

"MEMO STATEMENT ONLY"  
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## MESSAGES:

TRAN DATE	POST DATE	REF #	TRANSACTION DESCRIPTION	AMOUNT	-NOTATION-
01-23	01-24	00682	GLOCK PROFESSIONAL INC 770-319-4794 GA	450.00	
01-27	02-01	00044	GUNNY SURPLUS 9378367693 OH	1,040.00	
02-06	02-07	97792	PAYPAL *IAPE 402-935-7733 CA	350.00	

ACCOUNTING CODE		SIGNATURE/APPROVAL	
<b>CUSTOMER SERVICE CALL</b>  <b>800-344-5696</b>	CARD ACCOUNT NUMBER	ACCOUNT SUMMARY	
	STATEMENT DATE: 02/15/12	PURCHASES, FEES & ADJUSTMENTS	1,840.00
		CHECKS/CASH ADVANCES	.00
		CREDITS	.00
BILLING OFFICE ACCOUNT NUMBER BILLING OFFICE CONTACT AND ADDRESS CITY OF BELLEVUE-ONE CARD MARIE WOOD 210 W MISSION AVE BELLEVUE NE 68005-5237		STATEMENT TOTAL	1,840.00

elan

CORPORATE PAYMENT SYSTEMS  
P.O. BOX 6343  
FARGO, ND 58125-6343

ACCOUNT NUMBER

AMOUNT DUE

\$0.00



000008634 1 MB 0.404 106481515597730 P

JOHN STACEY  
CITY OF BELLEVUE  
210 W MISSION AVE  
BELLEVUE NE 68005-5237

"MEMO STATEMENT ONLY"  
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MESSAGES:

TRAN DATE	POST DATE	REF #	TRANSACTION DESCRIPTION	AMOUNT	-NOTATION-
✓02-27	02-28	38314	ACT*LAWS COMMUNICATION 877-551-5560 CA	585.00	
✓02-28	03-02	91564	CHULA VISTA RESORT WISC DELLS WI 081385 ARRIVAL: 02-28-12	88.09	
✓03-13	03-14	42720	ACT*LAWS COMMUNICATION 877-551-5560 CA	49.00	
✓03-13	03-14	42738	ACT*LAWS COMMUNICATION 877-551-5560 CA	195.00	
✓03-13	03-14	42746	ACT*LAWS COMMUNICATION 877-551-5560 CA	49.00	
✓03-13	03-14	34509	SKILLPATH SEMINARS MAIN 913-3623900 KS	209.00	
✓03-13	03-15	98610	STREET CRIMES 800-275-4915 IL	1,495.00	

ACCOUNTING CODE		SIGNATURE/APPROVAL	
CUSTOMER SERVICE CALL  800-344-5696	CARD ACCOUNT NUMBER	ACCOUNT SUMMARY	
	STATEMENT DATE 03/15/12	PURCHASES, FEES & ADJUSTMENTS	2,670.09
		CHECKS/CASH ADVANCES	.00
BILLING OFFICE ACCOUNT NUMBER		CREDITS	.00
BILLING OFFICE CONTACT AND ADDRESS CITY OF BELLEVUE-ONE CARD MARIE WOOD 210 W MISSION AVE BELLEVUE NE 68005-5237		STATEMENT TOTAL	2,670.09

